<u>8</u>	Yes	child because	sactions, or liabilities of a spouse or dependent o	" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?
₹ \ <u>\\\</u>	Yes	trusts" need not	of Official Conduct and certain other "excepted trusts" need not pouse, or dependent child?	on standards	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and ce be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
S	NESTION	EACH OF THESE QUESTIONS	- ANSWER	T INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	wered and "Yes" resp	must be ans	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	8 <	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.
<u>\$</u>	es Es	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	S _N	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
§ []	√g _s	or before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	8	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
Š	řes	receive any n the reporting	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? If yes, complete and attach Schedule VII.	₹	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
8 ₹	Yes	receive any regating more	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	₹	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? **Res.** Yes** **If yes, complete and attach Schedule I.**
			EACH OF THESE QUESTIONS	OF THES	J
assessed nore than	Ity shall be anne who files n	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	or Employing Office:	Officer or Employee	Status Member of the U.S. State: N 3 House of Representatives District: US Annual (May 15) Amendment
The same	05 Hive Se only)	2008 M.Y 15 PM 4: 05	2008 H. 202-225-4465 GFFI (Daytime Talebi-So)+0:US		E. SOUTT GARRETT
8	HAND DELIVERED	H HELIPIOYEES PELIPIOYEES PROPRIED HELIPION OF CENTER	Form A For use by Members, officers, and employees		UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

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SCHEDULE I— EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay) federal retirement programs, and henefits received under the Social Security Act

Source 2nd) 2nd)	Type Am Approved Teaching Fee Legislative Pension Spouse Speech Spouse Salary Am Approved Teaching Fee \$6 \$7 \$8	\$6,000 \$6,000 \$9,000 \$1,000 NA
NONE		

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SCHEDULE II — PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e. speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

	9		
Source	Activity	Date	Amount
	Speech	Feb. 2, 2007	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2007	\$500
None			

LAKE LAND BANK (STOCK)	LAKE LAND BANK (CHECKIN) ACC'T)	Druger Discipling Stock Juno	Drugtos DASIC StP JUHO	Dreyfus Appreciation June	JT 1st Bank of Paducah, KY Accounts	Examples:	SP, SP Mega Corp. Stock	Nooklet. Your personal residence(s) (un personal income); any debt owed to you set, or by you or your spouse's c sibling; any deposits totalling \$5,00 resonal savings accounts; any finate in or income derived from ent retirement programs. Schoose, you may indicate that an assource is that of your spouse (SF to child (DC) or is jointly held (JT), ir olumn on the far left.	provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the	BLOCK A Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other asset or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments).
*	*	×	×	×	×	+ +	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000	A B C D E F G H - J K L	Value of Asset Value of Asset Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
*	*	*	*	*	×		×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income	ome or Farm Income)	BLOCK C Type of Income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.
×	*	×	*	*	×	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000	X	Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was received.
		P	-0	O			S (partial)	(5) (partial) See below for example. P, S, E	If only a portion of an asset is sold, please indicate as follows:	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.

																		PRINCIPLE MID-CAP GROWTH	7	TRINGERS - ANNOTY	SP, DC, JT	Asset and/or Income Source		SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)
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L											<u> </u>					<u> </u>	<u> </u>		ļ		\$50,001 - \$100,000 m	BLOCK B Year-End Value of Asset	}	Z
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											ļ			<u> </u>		<u> </u>					NONE	<u> </u>	١	
		<u> </u>	<u> </u>					<u> </u>						<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	×	DIVIDENDS	S	1	
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																					Other Type of Income (Specify)	c me		Name
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SCHEDULE IV-TRANSACTIONS

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Report any purchase, sale, or exchange by you, your spouse or		Туре				j					Transaction	\$		1
stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions		7		(MO/DAY/YR)	8	0	0	m	ત્તા∖	ഒ	=	_	د	~
that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	PURCHASE	SALE	EXCHANGE	or Quarterly, Monthly, or Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,00 1- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000
SP, DC, JT Asset According Common Street (control only)		<		10.10										
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SCHEDULE V— LIABILITIES

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cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit

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			Nosce	Example:			
		-	Noger DANK. SpARTA, Hew Jensey	First Bank of Wilmington, Delaware	Creditor		
			Home Equity Loan - 10. Port Sinn no	Mortgage on 123 Main St., Dover, Del.	Type of Liability		
					\$1,001- \$15,000	8	
			*		\$15,001- \$50,000	၀	
					\$50,001- \$100,000	D	
				х	\$100,001- \$250,000	Е	Amo
					\$250,001- \$500,000	'n	Amount of Liability
					\$500,001- \$1,000,000	വ	Liabi
					\$1,000,001- \$5,000,000	I	 ₹
					\$5,000,001- \$25,000,000		
				L	\$25,000,001 \$50,000,000	ے ر	
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SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$122 or less need not be added towards the \$305 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$305 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

		Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
		Silver Platter (determination on personal friendship received from Committee on Standards)	Description	
		\$325	Value	

Name 2	
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SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and

spouse or dependent child that is totally independent of his or her relationship to you Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a or were paid by you and reimbursed by the sponsor.

spodse of dependent child that is totally independent of this of their leading ship to you.	ehendent of the	or their relationship to you.				
Source	Date(s)	City of Departure—Destination— City of Return	(Y/N	Food? (Y/N	Was a Family Member included? (Y/N)	Number of days not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
Roycroft Corporation	Aug. 611	DC—Los Angeles—Cleveland	Υ	Y	\ \ !	2 Days
EMMANUEL formanier	JAN 26.27	JAN 26.27 DC. NYC. NJ	_ <u>۲</u>	7	yes	None
Heritage fourpation	Jea 1-3	DC - DALTIMONE	Y	<u> </u>	Yrs	Love
				_	(

		Position	Exclude: Positions listed on Schedule	Report all positions, compensated or proprietor, representative, employee, corganization, or any educational or other	SCHEDULE VIII—POSITIONS
		Name of Organization	Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.	Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor organization, or any educational or other institution other than the United States.	Name Scon Churt

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

 _	 _		_	
			Date	•
			Parties To	
			Terms of Agreement	